Initial: 9/92

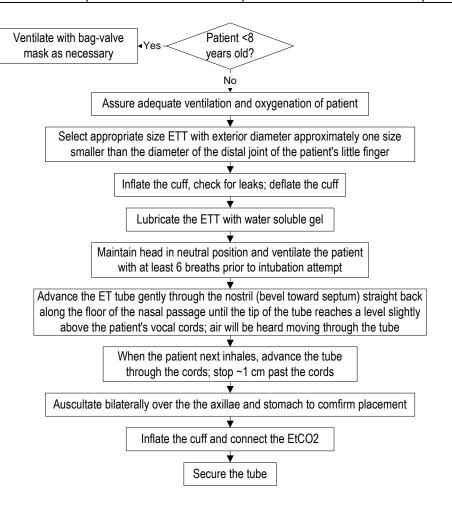
Reviewed/revised: 10/15/08

Revision: 5

## MILWAUKEE COUNTY EMS PRACTICAL SKILL NASOTRACHEAL INTUBATION

Approved by: Ronald Pirrallo, MD, MHSA
Signature:
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| Purpose:   |                          |                             | Indications:  Patients in severe respiratory distress Conscious patients unable to protect own airway Apnea or inadequate respiratory effort |                        |
|--|--------------------------|-----------------------------|--|------------------------|
| To provide positive control of an airway, especially in patients with some respiratory effort, who have a suspected C-spine injury, an intact gag reflex, or whose mouth cannot be opened To facilitate assisted ventilation in a patient with inadequate respirations |                          |                             |  |                        |
| Advantages:  | Disadvantages:           | Co                          | mplications:   | Contraindications:     |
| Positive control of the airway   | Requires special         | Airway trauma               |  | Basilar skull fracture |
| Prevents aspiration  | training and equipment   | Mis                         | splacement   | Major facial trauma    |
| Facilitates ventilation  | Cannot be used on        | Esophageal placement causes |  | Laryngospasm           |
| Provides route for administration  | pediatric patients under |                             | ypoxia   |                        |
| of selected medications  | 8 years of age due to    | Po                          | tential for simple or tension  |                        |
| Facilitates suctioning   | anatomy of the airway    | р                           | neumothorax  |                        |
| No need to manipulate C-spine  |                          | Ga                          | stric dilatation   |                        |
| Better tolerated by conscious  |                          | Ep                          | staxis   |                        |
| patient  |                          |                             |  |                        |



## NOTES:

• Limit intubation attempts to 2 attempts per provider with one additional attempt by one additional provider – total of 3 attempts. Assure adequate oxygenation and ventilation between intubation attempts.